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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

213542000102

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				\$370.00	OR		\$740.00
TOTAL CLAIMS (37 CFR 1.16(c))	13 minus 20 =	0	x\$9.00	\$370	OR	\$18.00	\$*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	5 minus 3 =	2	x\$42.00	\$84	OR	\$84.00	\$*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+\$140.00	\$0	OR	\$280.00	\$*
			TOTAL	\$454	OR	TOTAL	\$*

*If the different in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$42.00	\$*	OR	\$84.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$140.00	\$*	OR	+\$280.00	\$*
					TOTAL ADDIT. FEE	\$0	OR	TOTAL ADDIT. FEE	\$0

(Column 1)

(Column 2)

(Column 3)

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$42.00	\$*	OR	\$84.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$140.00	\$*	OR	+\$280.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

(Column 1)

(Column 2)

(Column 3)

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$42.00	\$*	OR	\$84.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$140.00	\$*	OR	+\$280.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	3113	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	131 minus 20 =	*
INDEPENDENT CLAIMS	5 minus 3 =	* 3
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 13	Minus **	=
Independent	* 5	Minus *** 3	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Th "Highest Number Previously Paid For" (Total or Independent) is the highest number found in th appropriat box in column 1.

SMALL ENTITY

TYPE ☐

OR

OTHER THAN

SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	370.00	BASIC FEE	740.00
X\$ 9=	/	X\$18=	
X42=	252	X84=	
+140=	/	+280=	
TOTAL	622	TOTAL	

SMALL ENTITY

OR

OTHER THAN

SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X42=	84	X84=	
+140=		+280=	
TOTAL		TOTAL	
ADDIT. FEE		ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X42=		X84=	
+140=		+280=	
TOTAL		TOTAL	
ADDIT. FEE		ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X42=		X84=	
+140=		+280=	
TOTAL		TOTAL	
ADDIT. FEE		ADDIT. FEE	